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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Clark Shultz**
Address: **P.O. Box 731**
Address2:
City: **McPherson** Zip: **67460-0731**
Home Phone: Business Phone: **(620) 755-3473** Cell Phone:
County: **McPherson** Email Address: **shultz@usa.com**
Office Sought: **Insurance Commissioner** District No.:

Treasurer Date Appointed: **06/17/2013**
Treasurer Name: **Carly Miller**
Address: **608 S. Saint Andrews**
Address2:
City: **Wichita** State: **KS** Zip: **67230**
Home Telephone: Business Phone: **(316) 680-7938** Cell Phone:
Email Address: **carly536@gmail.com**

Candidate Committee Date Appointed:
Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **6/17/2013 5:47:08 PM** Signature of Candidate: **Clark Shultz**

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